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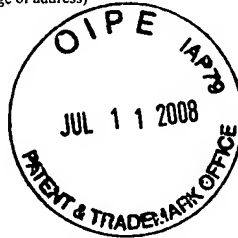
7590

04/29/2008

George O. Saile  
 28 Davis Avenue  
 Poughkeepsie, NY 12603

07/14/2008 WABDEL3 00000027 190033 10783195

01 FC:1501 1440.00 DA  
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<u>Stephen B. Ackerman</u>	(Depositor's name)
<u>[Signature]</u>	(Signature)
<u>July 9, 2008</u>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/783,195	02/20/2004	Mou-Shiung Lin	MS98-002CCC CIPB <del>CCCC</del>	6169

TITLE OF INVENTION: POST PASSIVATION STRUCTURE FOR SEMICONDUCTOR CHIP OR WAFER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	07/29/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
LOUIE, WAI SING	2814	257-758000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Saile Ackerman LLC  
 2. Stephen B. Ackerman  
 3. Rosemary L.S. Pike

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

MEGICA CORPORATION

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Hsin-Chu, Taiwan R.D.C.

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

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☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-0033 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature [Signature]

Date July 9, 2008

Typed or printed name Stephen B. Ackerman

Registration No. 37,761

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DUPLICATE

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July 9, 2008

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Stephen B. Ackerman

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